

INSTRUCTIONS FOR ESTIMATED TAX FOR INDIVIDUALS AND FIDUCIARIES

WHO MUST FILE ESTIMATED TAX. Each individual or fiduciary subject to Georgia income tax who reasonably expects to have gross income during the year which exceeds (1) personal exemption, plus (2) credit for dependents, plus (3) estimated deductions, plus (4) \$1,000 income not subject to withholding.

EXCEPTION. Estimated tax is not required if, under an agreement between the employer and the employee, additional tax is withheld to cover income that normally would require estimated tax to be filed. Individuals whose gross income from farming or fishing is at least two thirds of the total gross income from all sources may: (a) file as the other taxpayers or (b) file their return by March 1, 2005 and pay the full amount of tax due by that date.

PURPOSE OF ESTIMATED TAX. The purpose is to enable taxpayers having income not subject to withholding to currently pay their income tax. Taxpayers are also required to file an annual return claiming credit thereon for amounts paid or credited to their estimated tax.

PAYMENT OF ESTIMATED TAX. Payment in full of your estimated tax may be made with the first required installment or in equal installments during this year on or before April 15, June 15, September 15, and the following January 15. Please include your Social Security number on your check.

HOW TO ESTIMATE YOUR TAX. A schedule for computing your estimated tax is enclosed. Tax rate schedules are listed on Page 14.

PENALTIES. Failure to comply with the provisions of this law relative to underpayment of installments may result in the assessment of additional charges as a penalty. Willful failure to pay estimated tax will constitute a misdemeanor.

STANDARD DEDUCTION.

Single and head of household\$2,300

Married filing jointly\$3,000

Married filing separately\$1,500

Additional: Age 65 or older or blind. These additional deductions are for you and your spouse but only if the standard deduction is used (\$1300). These amounts are standard regardless of income.

WHEN AND WHERE TO FILE. Estimated tax required from persons not regarded as farmers or fishermen shall be filed on or before April 15 of the taxable year, except if the above requirements are first met on or after April 1 and before June 1, estimated tax must be filed by June 15; on or after June 1 but before September 1, by September 15; and on or after September 1, by January 15 of the following year. Individuals filing on a fiscal year basis ending after December 31 must file on corresponding dates.

Make check or money order payable to:
"Georgia Income Tax Division"

Payment should be mailed to:

Georgia Department of Revenue
P.O. Box 740319
Atlanta, Georgia 30374-0319

HOW TO COMPLETE FORM 500 ES PAYMENT. Calculate your estimated tax by using the schedule on Page 14(in the tax booklet). Line 12 is your estimated tax for the year. Divide Line 12 by the number of quarters of liability (see "When and Where to File" above) to compute the amount to be submitted quarterly. Enter this amount on Form 500 ES and submit to the Georgia Income Tax Division. A coupon booklet will be sent to you for the remaining quarters.

DEDUCTION AMOUNT FOR EACH EXEMPTION

Personal Exemption for self and spouse\$2,700
Dependent Exemption\$3,000
Maximum Retirement Income Exclusion\$15,000

Georgia Public Revenue Code Section 48-2-31 stipulates that taxes shall be paid in lawful money of the United States, free of any expense to the State of Georgia.

DO NOT mail this entire page. Cut along dotted line and mail only your coupon and payment

DO NOT STAPLE OR PAPER CLIP. PLEASE REMOVE ALL ATTACHED CHECK STUBS

-----Cut along dotted line-----

500 ES (Rev. 7/03)
Individual Estimated Tax

2004

Fiscal Year Ending _____ 20____



0450004013

MAIL TO:

Georgia Department of Revenue
P.O. Box 740319
Atlanta, GA 30374-0319
Telephone No. (404) 417-4480
or 1-888-247-8175

Taxpayer's SSN	Spouse's SSN	Tax Year	Quarter	Due Date	Vendor Code
		2004	3	09-15-04	N/A

NAME AND ADDRESS

If your name and address is incorrect, mark the change of address box and make changes
TYPE OF RETURN

☐ Address Change ☐ Individual ☐ Fiduciary

DO NOT STAPLE OR PAPER CLIP. REMOVE ALL CHECK STUBS Amount Paid \$ _____